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Atty Docket No. 015358-004600US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Nguyen, Maikhanh

Group Art Unit 2176

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Nguyen, Maikhanh**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Stephen Savitzky, et al., Application No. 09/302,552, filed April 30, 1999 for DOCUMENT STORAGE SYSTEM INCLUDING A USER INTERFACE FOR ASSOCIATING DOCUMENTS INTO GROUPS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

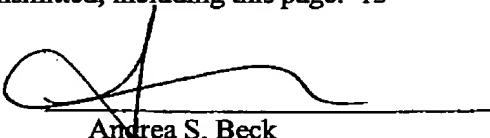
1. Transmittal-1 Page
2. Petition for Extension of Time-In Duplicate
3. Amendment-9 Pages

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**TRANSMITTAL
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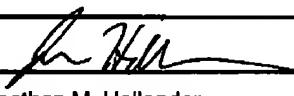
(to be used for all correspondence after initial filing)

		Application Number	09/302,552
		Filing Date	April 30, 1999
		First Named Inventor	Savitzky, Stephen
		Art Unit	2176
		Examiner Name	Nguyen, Maikhanh
Total Number of Pages in This Submission	12	Attorney Docket Number	015358-004600US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
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Printed name	Jonathan M. Hollander		
Date	9/6/05	Reg. No.	48,717

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I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on September 6, 2005.

Signature			
Typed or printed name	Andrea S. Beck	Date	9/6/05

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